



06-16-03

3636

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PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/020,688	
	Filing Date	12/14/2001	
	First Named Inventor	Robert McMillen	
	Group Art Unit	3636	
	Examiner Name	Joseph Edell	
Total Number of Pages in This Submission	18	Attorney Docket No.	41575/27975 (106)

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Charge Deposit Account -08-3460 <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> Affidavits/declarations(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 <input type="checkbox"/> Petition For Revival of an Application for Patent Abandoned Unintentionally Under 37 CFR 1.137(b))	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Request To Rescind Previous Nonpublication Request <input type="checkbox"/> Response to Notice of Allowability <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): postcard
Remarks:		<input checked="" type="checkbox"/> Commissioner is hereby authorized to charge fees in this application and any fees which may be required, or any overpayment, to Deposit Account 08-3460. I have enclosed a duplicate copy of this sheet <input type="checkbox"/> Amount: \$

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual Name	Robert C. Haldiman
Signature	
Date	June 13, 2003

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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10/16/03

Application of: Robert McMillen	Group No.: 3636
Serial No.: 10/020,688	Atty. Docket No.: 41575/27975(106)
Filed: 12/14/2001	
For: Push Lumbar Support with Flexible Pressure Surface	Examiner: Edell, Joseph

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AMENDMENT AND RESPONSE

HONORABLE SIR:

Responsive to the official communication of March 12, 2003, Applicant submits

the following Amendments and Remarks.

10/21/2003 PFAKIER 00000001 083460 100E0000

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It is not believed that extensions of time are required beyond those, which may otherwise be provided for in documents accompanying this Amendment. However, in the event that additional extensions of time are necessary to prevent abandonment of this application, then such extensions of time are hereby petitioned for under 37 C.F.R. § 1.136(a), and any fees required therefore are hereby authorized to be charged to our Deposit Account 08-3460.

Please amend the above-identified application as set forth below.